LAKES ENVIRONMENTAL ASSOCIATION PADDLE BOARD RACE WAIVER FORM

IN CONSIDERATION of being given the opportunity to participate in any Lakes Environmental Association ("Association") activities ("Activity") until the end of this calendar year, I, for myself, and my guests who attend the event, my personal representatives, assigns, heirs, and next of kin:

- 1. ACKNOWLEDGE, agree, and represent that I understand the nature of water sports Activities, both on water and land based, and that I am qualified, in good health, and in proper physical condition to participate in such Activity.
- 2. FULLY UNDERSTAND that: (a.) WATER SPORTS ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis, and death ("Risks"); (b.) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the Releases named below; (c.) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.
- 3. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a participant, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction.
- 4. HEREBY RELEASE, discharge, and covenant not to sue Lakes Environmental Association, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and Tarry-A-While Resort and owners, on which the Activity takes place, (each considered one of the Releasees herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as a result of such claim.

I have read this agreement, fully understand its terms, understand that I have given up
substantial rights by signing it and have signed it freely and without any inducement or
assurance of any nature and intend it to be a complete and unconditional release of all
liability to the greatest extent allowed by law and agree that if any portion of this agreement
is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.
Printed Name of Participant:
Address:

Street:	
City, State, Zip:	
Phone: Date:	
Participant's Signature (Only if age 18 or older):	
PARENTAL CONSENT	
AND I, the minor's parent and/or legal guardian, activities and the minor's experience and capabil participate in such activity. I hereby release, disc INDEMNIFY AND SAVE AND HOLD HARMLESS each demands, losses, or damages on the minor's according or in part by the negligence of the Releasees or operations, and further agree that if, despite this minor's behalf makes a claim against any of the AND HOLD HARMLESS each of the Releasees from	lities and believe the minor to be qualified to harge, covenant not to sue, and AGREE TO ch of the Releasees from all liability, claims, bunt caused or alleged to be caused in whole otherwise, including negligent rescues release, I, the minor, or anyone on the above Releasees, I WILL INDEMNIFY, SAVE, many litigation expenses, attorney fees, loss
liability, damage, or cost any may incur as the re	sult of any such claim.
Printed Name of Parent/Guardian:	
Address:	
Street:	
City, State, Zip:	
Phone:Date:	
Parent/Guardian Signature: (Only if participant u 18):	